NOTICE OF FILING/CLAIM FEE(S) DUE
TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THE FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: 09/119636

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee =	Tot
	Sm./Lg.				Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101				___	___	790
Total Claims >20	203/103	19	-20 = ___	X	___	___	___
Independent Claims >3	202/102	3	-3 = ___	X	___	___	___
Mult. Dep Claim Present	204/104				___	___	___
Surcharge	205/105				___	___	130
English Translation	139						___

TOTAL FEE CALCULATION   920

Fees due upon filing the application:

Total Filing Fees Due = $ 920

Less Filing Fees Submitted - $ 6

BALANCE DUE = $ 920

Sm C

Office of Initial Patent Examination